510(k) SUMMARY FOR SOFT TISSUE FIXATOR

510k#: K023963

MAY 0 5 2003

Owner / Operator: Future Medical Systems, SA.

Address: 265 Route de la Baronne, ST. Jeannet 06640 France

Phone: 011-33-4-92-12-32-56 Fax: 011-33-4-92-12-04-75

Contact: Patrick Janin (US Native/ English speaker)

Official correspondent:

Company: Future Medical Systems, Inc.

Address: 504 McCormick Drive, Glen Burnie, MD 21061

Phone: 410 761 9411 ext. 11

Fax: 410 760 9422 Contact: Mr. Steve Janin

Date of submission: November 26th 2002

Name of device:

ADHOC® CLAW

Common name:

Soft tissue fixator

Classification:

87 MBI, Class II, 21 CFR 888.3040

Predicate device:

K953877: MITEK GII (Mitek Surgical Products now Ethicon J&J) K884565: ACUFEX MICROSURGICAL (now SMITH & NEPHEW). K896310: ACUFEX MICROSURGICAL (now SMITH & NEPHEW).

Device intended use, description and substantial equivalence:

The ADHOC® CLAW is an implant used for rotator cuff repair in shoulder surgery. The ADHOC® CLAW is made of 316L stainless steel.

The ADHOC® CLAW and the predicate devices have the same final function. In addition, the small differences in design do not affect the use, safety and effectiveness, between the device and the predicate devices.

Based on these similarities and equivalences we believe the ADHOC® CLAW is substantially equivalent to the MITEK GII and the Acufex Fixation Button.





Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

MAY 0 5 2003

Mr. Steven Janin Future Medical System, Inc. 504 McCormick Drive, Suite T Glen Burnie, MD 21061

Re: K023963

Trade/Device Name: ADHOC® CLAW Regulation Number: 21 CFR 888.3040

Regulation Name: Smooth or threaded metallic bone fixation fastener

Regulatory Class: II Product Code: MBI Dated: March 25, 2003 Received: March 28, 2003

Dear Mr. Janin:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Office of Compliance at (301) 594-4659. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR Part 807.97). You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its Internet address http://www.fda.gov/cdrh/dsma/dsmamain.html .

Sincerely yours,

Celia M. Witten, Ph.D., M.D.

Mach of Melbers

Director

Division of General, Restorative and Neurological Devices Office of Device Evaluation Center for Devices and Radiological Health

Enclosure

510 K Number: K023963

Page 1 of 1

Device name: ADHOC® CLAW soft tissue fixator

INDICATIONS FOR USE:

The ADHOC® CLAW is an implant used for rotator cuff repair in shoulder surgery.

(Division Sign-Off)

Division of General. Restorative

and Neurological Devices

510(k) Number____

(Please do not write below this Line-Continue on another page if needed.)

Concurrence of CDRH, Office of Device Evaluation (ODE)

Prescription Use _____(Per 21 CFR 801.109)

OR Over-The-Counter-Use (Optional Format 1)